READING BABY'S CUES

Lisa Marasco MA, IBCLC, RLC

WHAT'S ALL THE FUSS ABOUT READING BABY CUES?

Perception, Accurate Interpretation, appropriate response

- Sensitivity to baby's cues is the origin of parent-infant attachment
- We must recognize our unique baby's body language
- We must respond appropriately to what baby is saying

Baby language: Crying is not the only form

- Facial expressions: smiling, frowning, looking puzzled, scared
- Body language: relaxed, squirming, pulled up, tight, rigid,
- Hands: fisted, open, grasping, reaching, splayed, flailing, pushing
- Mouth: crying, sucking, cooing

What do babies need?

Food
Touch
Interaction
Sleep
Shelter

HOW DO WE LEARN TO INTERPRET BABY BEHAVIORS?

- Culture
- Majority belief = Norm
- Our culture defines normal through the lens of bottle-feeding
- Acquisition of Parenting stages
- The influence of authority figures
- We may trust a person who seems to know more than us even when it goes against our gut
- Some authority figures are humble and open, while others presume to know all and abuse that position
- Influence of parenting books

THE ACQUISITION OF THE PARENTAL ROLE

Anticipatory Stage

Find out everything they can through observation, discussion w/ friends & family, classes, books

Formal stage

- Want the RULES
- No knowledge
- The Authority
- Check EVERYTHING

Informal stage

- Relax rigid rules
- Recognize not everything the "experts" say is correct

Personal Stage

- Having the ability to integrate authoritative sources and personal intuition
- Developing your own style

Where do these fit in?

 Some parenting books become The Authority and teach parents to look to the book for the proper interpretation

OUR CULTURE DEFINES NORMAL THROUGH THE LENS OF BOTTLE-FEEDING

- How much they should drink
- How long they should sleep
- How they should grow
- How to hold them
- How to soothe them

But we need to look for normal through the lens of the breastfeeding infant

- Bottle-feeding should imitate breastfeeding, breastfeeding should not imitate bottle-feeding!
- If you can read a puppy, you can read a baby. *BUT...* we may not afford a baby the same respect we give to a new puppy, for fear of establishing "bad habits" like co-sleeping. "Diane Wiessinger"

Behind the 8-ball from birth...

- Labor drugs can affect neurobehavioral functioning
- Higher neurobehavioral functioning = better breastfeeding behaviors
- Better breastfeeding behaviors elicit better responses from mothers

Understanding when a baby may be affected can help parents to reprogram their thinking

COMMONLY MISINTERPRETED BABY BEHAVIORS

We need to remember:

- The influence of birth factors on infant behavior
- What parents hear or say
- What messages parents internalize
- What's REALLY going on?

Sleepy baby the first week

What mothers hear:

- o "He's such a good baby!"
- o "Never wake a sleeping baby"

What's really going on:

 Not eating often enough because of labor meds, feeding schedules, jaundice



Baby quickly falls asleep at breast

What mothers hear:

- o "She's just not hungry
- o "She's just too tired"
- "She's just lazy"

What's really going on:

- o Baby has "checked out" because breastfeeding isn't working
- Lack of milk flow



Baby nursing "all the time"

What mothers hear or say:

- o "He's using you/me for a pacifier"
- o "You/I can't be doing that all the time!"

What's really happening:

- Baby not getting enough to eat due to inefficiency or lack of available milk so he keeps waiting for more
- o Too tired to keep trying.... Tongue-tie, low tone, etc
- High sucking need
- o Not feeling good- needs comfort



Baby bounces on and off breast

What mothers may say:

- "My baby doesn't like breastfeeding"
- o "My baby doesn't want the breast"

What mothers may hear:

- "He's just playing around"
- o "He's just messing around"
- o "We can't allow that"
- "You're torturing him"



What's really happening?

- o Baby is trying to say, "This doesn't feel right" or "I can't figure this out."
- o Baby is overwhelmed
- o "I can't breathe"
- o "I can't keep up"
- o "This isn't working right for me yet"

Breast refusal

What mothers may say:

- "My baby doesn't like the breast anymore"
- o "I feel like my baby doesn't like me"
- "My baby doesn't like breastfeeding"
- o "He sure is stubborn, isn't he?"
- o "My baby is grossed out by my milk"

What mothers hear:

- o "Boy, he sure has a temper!"
- o "You're gonna have your hands full with that one!"
- o "It's time to let her cry it out"

CHANGING PERSPECTIVES

- Pre-emptive prenatal education helps
- Explain the behavior from baby's point of view
- Role model by interacting with baby
- Remember that when baby has had a bad experience, he needs to time to build trust and erase those memories
- Teach them Reality
- Mother and baby must learn to trust each other
- Role modeling by action
- Teach /Learn coping skills

Getting a frustrated baby to breastfeed

- When baby is upset and crying, he will also tell you if and when he is ready to come back and try again
- First he often reaches a high pitch as he expresses his frustration
- Then the timber starts to come down- "un huh, un huh, un huh......"
- Offering the breast too soon will upset him even more and be unsuccessful
- Try skin to skin & baby-led attachment



BIBLIOGRAPHY

- Amy E. One Nurse's Notes: Reflections on the Interactive Newborn Bath Demonstration. *MCN: The American Journal of Maternal Child Nursing*. 2001;26(6):320.
- Britton JR, Britton HL, Gronwaldt V. Breastfeeding, Sensitivity, and Attachment. *Pediatrics*. November 1, 2006;118(5):e1436-1443.
- Colson SD, Meek JH, Hawdon JM. Optimal positions for the release of primitive neonatal reflexes stimulating breastfeeding. *Early Hum Dev.* 2008;84(7):441-449.
- Genna, C. W. Sensory Integration and Breastfeeding. Sudbury, MA: Jones and Bartlett, 2007.
- Hodges EA, Hughes SO, Hopkinson J, Fisher JO. Maternal decisions about the initiation and termination of infant feeding. *Appetite*. 2007;50(2-3):333-339.
- Hotelling BA. Styles of Parenting. The Journal of Perinatal Education. 2004;13(1):42.
- Klaus MH, Klaus PH. Your Amazing Newborn. Cambridge, MA: Perseus Books, 1998.
- Karl, DJ. Using Principles of Newborn Behavioral State Organization to Facilitate Breastfeeding. *MCN, American Journal of Maternal Child Nursing* 2004; Sept/Oct 29(5):292-298.
- Leitch DB. Mother-Infant Interaction: Achieving Synchrony. Nursing Research 1999; 48(1):55-58.
- Morgan, Beverly. Reading your baby's body language. (Tape cassette) Milky Way: San Jose, CA, 1998.
- Radzyminski S. Neurobehavioral functioning and breastfeeding behavior in the newborn. *J Obstet Gynecol Neonatal Nurs* 2005; May/Jun;34(3):335-41.
- Reinhartsen, D., & Pierce, P. Developing Communication Abilities. In P. Pierce (Ed.), *Baby Power: A Guide For Families For Using Assistive Technology With Their Infants and Toddlers.* Raleigh, NC: NC Department of Health and Human Services, 1994.
- White C, Simon M, Bryan A. Using evidence to educate birthing center nursing staff about infant states, cues and behaviors. *MCN*, *American Journal of Maternal Child Nursing* 2002; Sept/Oct 27(5):294-8.

ADDITIONAL RESOURCES:

Rose, Marion Badenoch. Reading the Cues: How to respond to baby's cries. http://www.instinctiveparenting.com/flex/reading the cues how to respond to babys cries/165/1

Understand Your Baby's Cues. http://www.babyart.org/newborn/understand-your-babys-cues.html

PBS Parents. Reading Your Baby's Cues http://www.pbs.org/parents/earlylearning/babycues.html

Klaus, Marshall and Phyllis. The Newborn's Six states of consciousness. http://parenting.ivillage.com/newborn/0,,lz 6qvd,00.html

Klaus, Marshall and Phyllis. Reading Your Baby's Cues http://parenting.ivillage.com/newborn/ncare/0, Iz 6qvt,00.html